



PHYSIOTHERAPIST INTERIM CERTIFICATE APPLICATION

You must visit the [physiotherapist interim certificate application web page](#) to complete your application package. Full instructions, forms and guidance documents are found on the web page.

Apply for an interim certificate if you want to work in Yukon, but have not completed your Physiotherapy Competency Exam (PCE).

For convenience, a brief checklist of required supporting documentation is provided below.

Supporting documentation checklist (More information is found on the [application website](#).)

- Copies of 2 pieces of government-issued ID.
- Transcripts from your school confirming graduation from a physiotherapy program. (School must send the transcripts directly to Professional Licensing and Regulatory Affairs (PLRA).)
- Proof of the completion of the written component of the Physiotherapy Competency Exam (PCE).
- Proof of registration for the clinical component of the PCE.
- Proof of a minimum of \$1,000,000 of professional liability insurance.
- Certificate of standing. (Required if you are licensed in another jurisdiction. Must be sent to PLRA directly from the jurisdiction.)
- Payment information form. (\$40 for registration and \$200 for certificate.)



PHYSIOTHERAPIST INTERIM CERTIFICATE APPLICATION

Complete all sections of this application form. Do not leave a section blank. If a section is not relevant, mark the section as "not applicable."

Start date in Yukon:
YYYY/MM/DD

Applicant information				
Legal last name	Legal first name(s)	Legal middle name(s)		
Other names by which you may be known			Date of birth YYYY/MM/DD	
Email		Phone		
Mailing address	City	Prov./terr.	Postal code	Country
Physical address (if different from mailing address)	City	Prov./terr.	Postal code	Country
Education information				
Name of the physiotherapy program you completed		Date you completed the program YYYY/MM/DD		
Name of the educational institute you attended to complete the program				
City/town, province/territory of institute		Country of institute		
Date you are registered to complete the clinical component of the Physiotherapy Competency Exam (PCE): YYYY/MM/DD				
Provide a chronological summary of your post secondary educational history relating to physiotherapy, giving names of institutions attended, dates of attendance, and degrees or diplomas received.				
Institution name	City, prov./terr., country	Start date	End date	Name of degree/diploma
Registration				
State the jurisdiction(s) you are registered in as a physiotherapist. (Ensure a certificate of standing is obtained for each jurisdiction listed.)				
Province/territory	Country			

Employment

State the following for your current employer(s) and most recent employer(s) prior to application.

Employer name	City, prov./terr., country	Start date	End date	Email

Licence limitations

My supervisor(s) will be:

I will be working at the following health facility, business, or clinic:

Licence endorsements

List the special endorsements you are applying for. (Attach completed special endorsement form and supporting documents to the application package.)

Declarations

If you answer 'yes' to any question below, additional information may be requested.

Have you applied for a physiotherapist certificate in Yukon before?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been denied registration or licensure by a registration or licensing authority for physiotherapy in Yukon or any other health profession in Yukon or any other province, territory, state or country?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a criminal record?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been subject to any investigative proceedings with respect to professional misconduct, incompetence, or incapacity, in physiotherapy or any other health profession, in Yukon or any other province, territory, state or country?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you currently under investigation or involved in any proceedings which could result in the withdrawal of your physiotherapist registration by a registration/licensing authority for physiotherapy in any province, territory, state or country?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you or have you ever been registered in another health profession, other than physiotherapy in any province, territory, state or country? If yes, what profession and in what jurisdiction? _____ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No

Personal certification

Yes, I hereby certify that I am the person making application for registration as a physiotherapist in Yukon, and that all statements are true and complete in every respect. I understand that falsification of information on this application may result in the cancellation of my application for registration or cancellation of an issued certificate.

Signature of applicant

Date

YYYY/MM/DD